

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s):	Paul A. Worsowicz; Erik W. Tayl Heidi L. Kroll; Sara K. Bosiak	or; Lisa K. Shapiro, Ph.D.; Ari B. Pollack;
II. Name of Lobbyist's partn	ership, firm or corporation, if any:	
	GALLAGHER, CALLAHAN &	& GARTRELL, P.C.
	214 North Main Street, Con	cord, NH 03301
603-228-1181	603-226-3334	worsowicz@gcglaw.com
(Telephone)	(Fax)	(Email)
	Choose one – file separate reports for ons which are not attributable to any o	each client, OR you may file a separate report for one client.)
X All reportable transacti	ons occurring in the month prior to the r	eporting date relative to the following client.
	AGGREGATE MANUFAC	
(Ful	Name of Client as it appears on the Lol	obyist Registration Form)
unrelated to any particu		st's family), or the lobbying firm listed below which are July 25, 2018
Reports cover: activity fr	om date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
0	ctober 31, 2018 🗖	January 30, 2019 □
activity	from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18
	eceived and no reportable transaction is just this form and submit it to the Secre	s made since the last report. etary of State's Office, State House, Room 204.
VI. Check if additional repo	rts are attached: es or made expenditures, you must file A	Addendum A - Fees and Expenses
Expense Reimburseme	nt	ust file Addendum B – Report of Honorariums or
		ns, you must file Addendum C – Political Contributions
Sworn Statement/Affirmation I have read RSA 15, RSA 15-E to the best of my knowledge ar	and RSA 664 and hereby swear or affin	m that the foregoing information is true and complete
Banda 4	Jorsans)	7-17-18
(Signature of Lobbyist)		(Date)

Paul A. Worsowicz

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Paul A. Worsowicz; Erik W. Taylor; Lisa K. St L. Kroll; Sara K. Bosiak	apiro, Ph.D.; Ari I	B. Pollack; Heid
II. Name of lobbyist's partnership, firm or corporation, if any:		
GALLAGHER, CALLAHAN & GARTREI	LL, P.C.	
(Name of partnership, firm or corporation		
III. Name of Client AGGREGATE MANUFACTURERS OF NH	Date July 25,	2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above the lobbying, including fees for services such as public advocacy, government relatincluding research, monitoring legislation, and related legal work. The gross feeby any expenses:	ions, or public relat	ions services,
a) Total of all fees received in this reporting period	a) \$	19,887.:
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)	b) \$	15,792.
c) Total of all fees received to date. (Add lines a and b)	c) \$ 	35,680.
d) Indicate the amount of any such fees that are due, but have not yet been paid.	d) \$	
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each clilobbyist(s)/firm that are unrelated to any one client a separate report may be fare to be reported in one of three categories of expenses: (a) the aggregat reporting period for salaries, benefits, support staff, and office expenses; (bexpenses where the expenditure was of \$25.00 or less (for example: meals put the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 th purchase of a ceremonial object given to a person being lobbied with a value statement of each individual expenditure made during this reporting period of covered by (a) (for example: purchase of a meal with value of greater than \$25 given to the subject of lobbying with a value greater than \$25, but not great legislative reception). Expenses for honorariums, expense reimbursement, or on separate addendums and should not be reported on Addendum A.	ent and if expenditualled for the lobbyiste total of all expend) the aggregate total creased during a bust is given to the periof \$25.00 or less); greater than \$25.00 is, purchase of a cerester than \$50, restau	res are made by i(s)/firm. Expe ses paid during al of all indivi- usiness lunch we erson being lobb and (c) an item for any purpose ermonial object trant expenses f
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported 	a) \$ b) \$	17,567.50
in a), of \$25 or less.	c) \$.00.
c) Total of all itemized expenditures reported in detail in section VI.	υ, ψ	.00

Client: AGGREGATE MANUFACTURERS OF NH d) Total expenses for this reporting period. (Add lines a, b and c.) d) \$ 17,567.50 e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.) e) \$ 16,380.00 f) Total of all expenses year to date. f) \$ 33,947.50 VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Lobbyist Fees & Expenses, Addendum A - Page 2

Paul A. Worsowicz
(Print Name of Lobbyist)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

JUL 2 5 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

Statement of Income and Expenses for:				
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Aggregate Manufacturers of NH				
Date of Report (chec	ck one):			
April 25, 2018 🗆	July 25, 2018 🔀	October 31, 2018 🗆	January 30, 2019 □	
	RSA 15-B, RSA 664, the Sas submitted with that State		penses described above, and the Addendum forms being	
1 Addendum A(s	s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.				
(Signature of Lobby	ist)		7/16//8 (Date)	
Erik W. Taylor (Print Name of lob)	nvist)	. 	,	
(- y,			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Statement of Income and Expenses for:			
Name of Lobbying p	partnership, firm or corpora	tion: GALLAGHER, CAL	LAHAN & GARTRELL, P.C.
	ve blank if Statement is for Aggregate Manufacture		poration and not related to any
Date of Report (che	ck one):		
April 25, 2018 □	July 25, 2018 🔀	October 31, 2018	January 30, 2019 □
April 23, 2016 🗀	July 25, 2016	October 31, 2018	January 30, 2019
•	-	Statement of Income and Exement (insert the number of	penses described above, and the Addendum forms being
1 Addendum A(s	3).		
0 Addendum B(s	r).		
0 Addendum C(s	s).		
•	firm that the foregoing info of my knowledge and belie		nd each Addendum is true and
//k	5		7-18-18
(Signature of Lobby	vist)		(Date)
Lisa K. Shapiro, Ph			
(Print Name of lob)	byist)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Statement of Income and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Aggregate Manufacturers of NH			
Date of Report (check one).	<i>:</i>		
April 25, 2018	y 25, 2018 🗶	October 31, 2018 🗖	January 30, 2019 🗆
I have read RSA 15, RSA 15 following Addendums submitted):		•	penses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm tha complete to the best of my k	~ ~	ion on the Statement and	d each Addendum is true and
08.			7 (18 (18 (Date)
(Signature of Lobbyist)			(Date)
Ari B. Pollack (Print Name of lobbyist)		_	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Statement of Income and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Aggregate Manufacturers of NH			
Date of Report (check one):			
April 25, 2018 ☐ July 25, 2018 ☒ October 31, 2018 ☐ January 30, 2019 ☐			
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):			
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.			
(Signature of Lobbyist) 7 S 18 18 (Date)			
Heidi L. Kroll (Print Name of lobbyist)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Statement of Income and Expenses for.			
Name of Lobbying p	artnership, firm or corpora	tion: GALLAGHER, CAL	LAHAN & GARTRELL, P.C.
•	e blank if Statement is for Aggregate Manufacture	• • • •	poration and not related to any
Date of Report (chec	k one):		
April 25, 2018 🗆	July 25, 2018 🗶	October 31, 2018 🗆	January 30, 2019 🔲
•	·	Statement of Income and Exement (insert the number of	penses described above, and the Addendum forms being
1 Addendum A(s).		
0 Addendum B(s).		
0 Addendum C(s).		
•	irm that the foregoing info of my knowledge and belie		nd each Addendum is true and
Saw 14 (Signature of Lobby	-Bunic		7-17-18
(Signature of Lobby	ist)		(Date)
Sara K. Bosiak			
(Print Name of lobb	oyist)		